

L15000 192036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

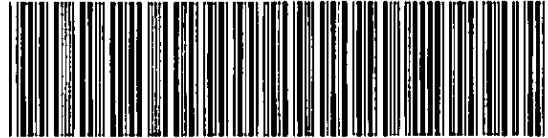
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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1. The first part of the document is a title page. It contains the title "THE EFFECTS OF THE 1970-1971 WINTER ON THE WINTER WHEAT CROPS IN THE NORTH CENTRAL STATES" and the author's name "J. H. HARRIS".

2. The second part of the document is a table of contents. It lists the following sections: "Introduction", "Materials and Methods", "Results", "Discussion", "References", and "Appendix".

3. The third part of the document is the introduction. It discusses the effects of the 1970-1971 winter on the winter wheat crops in the North Central States.

4. The fourth part of the document is the materials and methods section. It describes the experimental design and the data collection methods.

5. The fifth part of the document is the results section. It presents the data collected during the study.

6. The sixth part of the document is the discussion section. It discusses the implications of the results and the factors that influenced the outcomes.

7. The seventh part of the document is the references section. It lists the sources used in the study.

8. The eighth part of the document is the appendix. It contains additional information related to the study.

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2021 JUN 25 AM 8:56
SEAL BROOKFIELD
TALLAHASSEE FL

JUL 22 2021
C Kinsey

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PFH Adventures 2.0 LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Bruce G. Greer, Attorney

(Contact Person)

Bruce G. Greer, PA

(Firm/Company)

1611 N.Federal Highway
(Address)

Lake Worth Beach, FL 33469

(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce G. Greer at (561) 588-3311
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee ✓ ☐ \$55 Filing Fee & Certified Copy

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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2021 JUN 25 AM 8:56
TALLAHASSEE, FL

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: PFH Adventures 2.0 LLC

2. The Florida document/registration number assigned to this limited liability company is:
L 15000192036

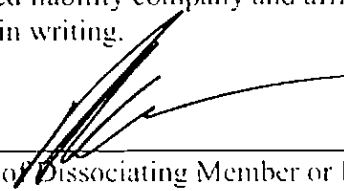
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/14/2021

4. I, Robert Eugene Hearn, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional) 